

## **Local Health Department Feedback for various issues for the R317-4 Rule Revision**

1. *DWQ feels strongly that in some form, the existing variance provision needs broadening to include the whole rule. Right now a variance can only be granted for slope and distance to dry gulch/gully. The existing variance process involves a list of things to be completed and then both DWQ and LHD concurrence (review Section 12 of the proposed rule). What are your thoughts about broadening the availability of a variance?*

**Bear River** - Brought up this issue with the BRHD Board and there were no concerns with broadening the variance.

**Central** - At this time CUPHD does not grant variances.

**Davis** - Davis County feels that this may create some tension between the LHD's and the State. Very often, the locals and the state feel "pressure" from totally different and unrelated entities and it may become difficult to come to agreement on some issues. We don't feel like this would be the case with our County but could see other health districts being put in complicated situations.

**Salt Lake Valley** - The Salt Lake Valley Health Department agrees with the current variance provision in the existing rule. A change to this provision to allow for a variance to any part of the rule may jeopardize the department's ability to enforce the proposed rule. In addition, we don't agree with a blanket variance to the onsite wastewater rule and the possible unanticipated consequences.

This has been seen when one organization is willing to grant a variance, planning department for instance, that is less restrictive than the Health Department's regulation or rule enforcement.

Will the proposed changes by the stakeholders address the variances that they need? If not, what specifically are we trying to achieve with broadening the variance request parameters. Identifying the specific items in rule that still are in conflict may be beneficial.

**Southeast** - We agree that people should have the opportunity to explain why a variance might work under several situations

**Southwest** – No concerns with this issue.

**Summit** – The variance procedure as it is written is very difficult to use there for we doubt many requests will be made. Therefore we have no problem broadening it to other areas as long the local HD has final say.

**Tooele** - To our recollection we have never had a request for a variance, so we don't have a strong opinion on this one. We do agree that DWQ and LHD's need concurrence on variances.

**Tri County** - We are not opposed to broadening the variance request, but it needs to be constructed in a way that a variance is not easy to obtain. We would be inundated with request if it is too easy. There are very few requests for a variance (or none) and there are very few reasons to grant one.

**Utah County** - UCHD has no objection to opening up other parts of the rule to variance requests. However, we feel strongly that a definite procedure or protocol must be established and followed. UCHD also feels that both the LHD and DEQ should be in agreement as to granting or denying the request.

**Wasatch** – To broaden the variance opens several concerns including dealing with local regulations, potentially undermining R317-4 through inconsistent determinations, and the potential for unintended consequences.

**Weber Morgan** - Weber-Morgan does not support broadening the variance provision to the onsite wastewater rule. Weber believes that the state rule should be the minimum standard required and that exceptions to the minimum standard should not be allowed. Weber –Morgan maintains the position that some properties with limiting conditions can be addressed by changing wording in the regulation in relation to experimental and alternative systems. Weber also maintains the position that some properties are not suitable for onsite wastewater disposal and the state rule must dictate these conditions.

Creating additional variance provisions within the State rule has the potential to create additional conflict between DWQ and local health departments. Just as local health doesn't have the authority to grant exemptions to the state rule, the State does not have the authority to grant variances to local ordinances. The potential exists for property owners to receive a variance from the state that cannot be honored by the local health department. This will only lead to further frustration and expense by the property owner.

2. *Alternative systems – Both existing and proposed rule address the use of alternative systems in the same way.... The LHD has the ability to 'opt in' to use them in their jurisdiction. There is a proposal to consider an 'opt out' approach. What this means is that rule would be written such that alternative systems would be available state wide unless the LHD and/or other local entities, through ordinance or other legal means, chooses not to allow them. Please share your thoughts on this proposal and how it may affect your department.*

**Bear River** - The BRHD Board was concerned that some alternative systems might not be able to always function in a manner that will protect public health in some areas because of the local conditions. For example, Northern Utah is colder and wetter than the southern part of the state and the geology is different; will the technology work in all conditions? Probably, but the Board would like to be sure. Blanket approval throughout the state for alternative systems should be given, but the permitting process for some complex alternative systems may need to be more extensive. A more extensive permitting process should require that the proposed system can meet all local issues/conditions before permitting and this would need to be done on a case by case basis. Perhaps some permits will need to be reviewed by the Board of Health before being issued.

**Central** - Regardless of the wording, Central does not have the manpower or resources to run an alternative systems program. At this time, the BoH has no interest in allowing these systems and we will not permit them. If DEQ wants to permit an alternative system in our district, it will need to be approved by the BoH prior to allowing the installation of the system. We have been lucky that, even in my short time, we have not had any inquiries into an alternative system.

**Davis** - Following a lot of discussion and trying to provide some solutions to several failing systems, Davis County has recently begun accepting alternative systems. The Division's stance for a long time, based on specific variables in our County, was to allow only traditional systems and hope that the sewer would eventually be available in all areas. With the differences throughout the state and the health districts, we feel that the LHD's should be able to decide on their own whether they will allow alternative systems.

**Salt Lake Valley** - The Salt Lake Valley Health Department will draft a regulation that allows for Alternative Systems. The Department sees these systems may be used in very specific areas of the County. Allowing alternative systems will not solve the various problems that limit property owners from building on their properties. Limiting factors in the valley include slopes over 25%, groundwater, bedrock, fractured bedrock, limiting soil conditions, and inability to meet set back requirements.

The effect this change will have on the department is an increased need to train staff, draft, adopt and apply a regulation that includes an operation and maintenance program, and staff management of alternative system permit and reporting requirements. Currently one individual is Level 3 Certified. The Department's preference, whenever practical, is to have sanitary sewer service. Salt Lake County is mostly urban with some areas that do not have sewer service available. In addition, the Department is revising the Subdivision Regulation and anticipates a calculation for new developments to extend the sewer service to the development.

**Southeast** - We support this.

**Southwest** – No concerns with this issue.

**Summit** – We are in favor of the (opt in), but it will not affect us either way.

**Tooele** - We are against the 'opt out' approach. We feel that a local jurisdiction needs to be able to handle the requirements of an alternative system program and should be able to 'opt in' when they are ready. The 'opt out' approach would be cumbersome and time-consuming for the locals.

**Tri County** - I like the idea of opting out, but that is because we already allow alternate systems in all counties.

**Utah County** - UCHD has no objection to this change. UCHD has adopted an alternative system regulation and does not believe this change would impact what we do. However, the question came up about "opting out" being in conflict with state statute requiring LHDs to justify a local ordinance being more stringent than state or federal rule?

**Wasatch** – We have no concerns with this proposal as we already have an alternative wastewater program.

**Weber Morgan** - Weber-Morgan has learned from experience that more advanced systems will fail at a higher rate when appropriate design, monitoring and maintenance is not completed. With current rule, local health departments have to demonstrate a commitment to properly manage alternative systems. This commitment demonstrates the support of their department, local political bodies and legal counsel. It is our opinion, that the proposal to allow alternative systems state wide unless a department chooses

to opt out, will result in some areas not having the necessary tools and support to properly manage alternative systems. Without proper management, these systems will experience a higher failure rate that may present a higher risk to public health and the environment.

3. *There has been significant discussion regarding roles and responsibilities, specifically about LHD staff doing percolation tests/soils evaluations, designs, and then reviewing (inspecting) their own work. There is a proposal to disallow this practice and to do it through either rule or DWQ administrative procedures. What are your thoughts and how would it affect your department.*

**Bear River** - The BRHD Board of Health is very concerned about this issue. The BRHD Board of Health would like to discuss this matter with Walt Baker in person. The Board of Health does not want this practice to be disallowed.

**Central** - Changing the evaluation process will cause a stir here in the central district. There are a number of contractors that depend on this work for income that have the ear of our local commissioners and BoH members. If soil evaluation is given to the LHD, two things will happen: 1) our fees for a septic permit will have to double; 2) There will be push back from the local contractors and soil testers for the local government stripping away potential work. Something that will not sit well with commissioners.

**Davis** - Based on our staff's training and expertise, our Division is currently only completing soil evaluations. We would recommend allowing LHD's to have some kind of verification process for these responsibilities if there are questions about their accuracy. I personally agree that there is a problem with completing these tasks and being the one overseeing the systems and that it may create some sort of liability to our Division.

**Salt Lake Valley** - This does not affect our department. The Department does feel that allowing individual Health Departments to design and to regulate may increase liability and these services should be left to the certified individuals not employed by that Health District.

**Southeast** - We do design and approve our own work, we do not do perc. tests and soil evaluations. The fact is, for a normal system it is not difficult, so I don't see a problem designing one that we think is proper, and then inspecting the constructed field to meet those requirements.

**Southwest** – SWUPHD employees do not perform soil test or design on-site wastewater system. SWUPHD staff review soils test reports and design work submitted by certified on-site professionals. This minimizes the likelihood of any conflict of interest concerns.

**Summit** – We don't do either at the present time so it will not affect us.

**Tooele** - A few years ago we felt that doing the design work and permitting and inspecting was somewhat of a conflict (we have always required third party perc tests/soil evaluations), so we started requiring third party designs at that time. Initially we got some resistance from the local contractors (one more step/hoop to jump through, increased cost, etc...), but after a couple of months of transition this requirement is working very well. We agree that there should not be a conflict with LHD's doing the field work and regulatory work, but also recognize that in rural areas the LHD may be the only option for the field work.

**Tri County** - We don't allow Health Department employees to conduct perc tests, do soil logs, design systems or any other function that we feel is a conflict of interest. We would be ok with it in rule. Not sure if it is necessary. The reason some districts don't have certified people is because Health Districts are willing to do the work. We were all in that situation when certification started.

**Utah County** - UCHD requires onsite wastewater designs to be provided by Level 2 certified individuals. UCHD accepts percolation tests and soil evaluations from certified individuals. However, UCHD reserves the right to require prior notice to percolation tests and soil evaluations in order to observe the procedure and/or verify tests were actually performed.

**Wasatch** – We have a local regulation to deal with this issue. No concerns with the proposal.

**Weber Morgan** - Weber-Morgan staff currently conduct site evaluations, soil evaluations and groundwater monitoring. Percolation tests and system designs are completed by certified individuals in the community. We feel this approach enables the department to have the checks and balance in place to appropriately administer the program. At times, our staff will assist in the design of systems to replace failing systems. We feel this service provides additional incentive for owners of failing systems to report those to the department and have them repaired correctly. Our department would support a change in the regulation that further defined the roles of parties involved. These proposals however, should include the flexibility for the local health departments to perform services when needed, or as a means to verify information that has been submitted for review and approval.

4. *Soils evaluation vs. Percolation testing – As you know, the draft rule allows a soil evaluation to be the tool for sizing drainfields without having to do a percolation test. Again, a lot of discussion on this centered around the competency of those doing the evaluations, the percolation test being optional, and what happens when there are discrepancies (evaluation/perc, evaluation of certified person/LHD person, soil type/percolation result, etc.) There is discussion about adding an additional level with additional training to the certifications to ensure competency for soils evaluation also a discussion around having every evaluation/perc test verified by either the LHD or their agent (PE, Geotech, soil scientist, etc. w/ appropriate certification). Also a discussion about a specific and graduated process to rectify discrepancies such a lab analysis, geotech/soils scientist, other hydraulic conductivity testing, etc. What are your thoughts and concerns about these concepts?*

**Bear River** - The BRHD board had no comments regarding this issue. EH staff is comfortable with the draft rule.

**Central** - Currently, CUPHD allows both types of testing for soil evaluation. If the local EHS has a concern or a question with either of the tests, they can require the other test be conducted in conjunction with the first test.

**Davis** - Soil evaluation training is always a good idea—it is complex and extremely variable in my opinion. Our Division is fortunate to have someone that we can rely on for accurate evaluations but I wonder about losing that person or the accuracy of other EHS's throughout the state (including our own Division). We think it would take some pressure and liability off of the LHD's to have an independent, professional "sign off" on projects. We like the specific process for rectifying discrepancies idea.

**Salt Lake Valley** - Soil evaluations vs. Percolation tests are difficult. As stated, increased training is necessary. Currently, in certification classes a half day is completed in the field. There should be soils that require percolation testing if encountered. In addition, this will necessitate department staff be on site during the classification process for inspection and verification of the results. The discrepancies will be a big issue. It is known that individuals with similar training have a large amount of variation when this type of analysis is performed depending on experience, geological background, and training. Lastly, it should be defined how discrepancies are resolved. Resolution may include lab analysis or percolation test.

The Health Department would propose that it be an option. The requirement to do such an evaluation would be done with a third party contract between the health department and a competent soil evaluator and/or lab.

**Southeast** - This is complicated, as you well know. I personally wouldn't mind just sending it off to a lab for analysis, but there would have to be recourse if it came back with a negative soil result, particularly in an area where we have installed successful systems over many years. Don't really have a great answer here. If we were to verify every perc test we would drastically have to increase our rates and a whole lot of people would be unhappy with that.

**Southwest** – SWUPHD believes that although percolation test do have some limitation, they can be useful tools used to determine the suitability of an area for a wastewater system.

**Summit** – We favor having both available but feel there need to be more training or some sort of separate certification for soil evaluation. The graduated process seems to be overkill.

**Tooele** - This is a tough issue to resolve in rule. We feel that as long as there are different people doing perc tests and soil evaluations, there are going to be discrepancies in the results. We agree that there should be increased training for soil evaluators to improve consistency, and a means to rectify discrepancies (i.e. lab analysis, etc...). If a perc tester/soil evaluator holds the proper certification we have to trust those results. We have not seen septic system failures due to poor perc tests or soil evaluations.

**Tri County** - It is a good move to allow soil evaluations instead of a perc test. Training would need to be improved so that certified individuals are competent to do them. Soil evaluations may vary from person to person, but no more than perc tests. It would improve our decision making if we had both perc test and soil logs to help size system. There is no need to involve a geotech, PE, or other professional unless there was a disagreement where this would help with decision making. There is a false idea that the Health Districts want to disapprove properties and that soil evaluation would help them do that. Decisions should not be made based on this idea. Let's not spend too much time trying to fix a problem that doesn't exist. We currently look at every soil pit to see if the sizing and design appear to be appropriate, but we do not verify perc tests. We rely on the certified individuals to do the work.

**Utah County** - UCHD has no objection to certified individuals performing these tests. UCHD does not feel that additional training is required. UCHD reserves the right to observe and verify any testing and require additional testing if deemed necessary by UCHD. UCHD also reserves the right to determine which test to use if there is a discrepancy between the tests.

**Wasatch** – The process to address discrepancies needs to be developed. We concur that additional training (from what is currently offered) should be required before allowing only soil classification, but probably not another level of certification.

**Weber Morgan** - Weber-Morgan is in support of eliminating the requirement to conduct a perc test and relying more on soil properties in permitting onsite systems. Research has demonstrated inadequacies in the perc test that can be overcome by utilizing soil properties. This research also supports the theory that the discrepancies between soil properties and percolation rates are strongly tied to the inadequacy of the percolation test. The use of soil properties provides an additional tool for evaluating properties and resolving discrepancies. The USDA soil classification system is a sound, scientific process that is well defined. Professionals outside of the onsite industry as well as laboratory analysis can be completed for soil properties adding a third party component. This is not possible with percolation testing.

Weber-Morgan does not support the discussion of adding an additional level of certification to the current training program. As the training program exists today, the foundation is in place for competent professionals to be trained to an appropriate level to conduct onsite related work. Weber-Morgan would propose that the current training system continue to be utilized. In that, the training, testing and recertification curriculum can be adjusted to enhance the understanding of the USDA soil classification system. This can easily be accomplished by enhancing the training related to soil classification and by adding a “hands-on” demonstration of competency to obtain or renew certifications.

5. *The existing and proposed rule addresses fast soils (< 1 minute per inch percolation rate/coarse sand, loamy coarse sand) the same way – it is unsuitable. It is proposed to allow packed bed systems with UV or other disinfection (including soil at a deeper depth or when groundwater is really deep) on these soil types. What are your thoughts and concerns about this?*

**Bear River** - See comments for question number 2.

**Central** - As discussed in question #2, Central currently has no interest in alternative systems.

**Davis** - We feel that there are other waste concerns other than what UV or disinfection may solve but that continued oversight and management of these systems are the key components. We do not feel this will impact our County.

**Salt Lake Valley** - Changes to the packed bed systems with UV or other disinfection should necessitate a number of requirements, including: testing after final treatment, actions to be taken when parameters are exceeded, maintenance, UV logs and testing to insure proper disinfection, and a third party that has the expertise to operate and manage this type of a system. In addition, new funding sources and training would be required for the Department’s staff to manage such a program.

In addition, the rule needs to outline the type of geotechnical studies that will be required to determine really deep groundwater or appropriate soils at a deeper depth. This type of a system may be good to consider as a last resort for an individual with a failing system that may be forced to a holding tank.

**Southeast** - Fine.

**Southwest** – SWUPHD employees are not familiar with disinfection systems and have not received adequate training necessary to regulate such systems. SWUPHD would be interested to know what training would be necessary to regulate these systems and what proposal for regulating such systems are being considered.

**Summit** – We would favor the existing and proposed rule versions.

**Tooele** - We are ok with the new proposals to allow systems in fast soils with certain requirements.

**Tri County** - We are ok with fast soils and deep groundwater using disinfection. We have never had a request for this and would not want to hold things up when there would be little need for this.

**Utah County** - UCHD has no position on this matter without more specific information. More specific information should include such things as how deep is "really deep" and what kind of control measures would be required to ensure disinfection equipment is functioning correctly?

**Wasatch** – We have no concern if appropriate maintenance and operation are required.

**Weber Morgan** - Weber-Morgan would be in support of this proposal as long as appropriate monitoring and maintenance requirements are established for the disinfection units.

6. *There is a proposal to allow the pressurized drainfield systems currently proposed w/in the alternative section, to be it's own category outside of alternative systems. The design, maintenance, and other issues would be addressed in rule, but they would be allowed state-wide. There are no credits given for using these systems. Ongoing maintenance (maybe through an operating permit) is still a needed component. What are your thoughts and concerns about this?*

**Bear River** - Not discussed with BRHD Board. Our thoughts as an EH staff are that if alternative technology is to be made more available throughout the state, pressurized systems should stay in the alternative category and be handled that way. If the rule does not require people to do pressurized drainfields, there will not be any installed; people will choose gravity distribution 99.99999 percent of the time!

**Central** - As discussed in question #2, Central currently has no interest in alternative systems.

**Davis** - Once again, we agree that the ongoing maintenance and management is the key to these systems and are ok with this proposal.

**Salt Lake Valley** - The department opposes credits in this situation. In addition, what is the purpose of removing pressurized systems from the alternative system option? The requirements for alternative systems are outlined for each type in the rule, why not for this type of a system? The other question is if this is occurring does there need to be a process to remove an alternative system and put it in its own category in the rule, similar to how experimental systems are placed as alternative systems?

**Southeast** - I like having pressurized systems outside of the rest. The proposal seems fine.

**Southwest** – SWUPHD believes that pressurized drainfield system should not be part of the alternative systems section of the rule.



**Summit** – Should be its own category outside alternative systems and address design and maintenance in rule. Should be allowed statewide and no credit allowed. Should have some type of operating permit.

**Tooele** - We think that this should probably be its own section. The maintenance component is needed, but we shouldn't restrict pressurized distribution systems to the LHD's that have an alternative program.

**Tri County** - We already allow people to install pressurized systems, and have written our own rule for permitting them. We would be in favor of adding it to the rule.

**Utah County** - UCHD is in support of pressurized systems. UCHD has no concern where these systems are placed in rule so long as qualified (Level 3 certified) individuals design these systems. Also maintenance requirements should be outlined

**Wasatch** – We would support this proposal as long as appropriate design, maintenance and operation are required.

**Weber Morgan** - Weber-Morgan would be in support of this proposal as long as appropriate monitoring and maintenance requirements are established for the pressurized absorption systems and the local health departments issuing permits have demonstrated a commitment to managing these systems.

7. *A couple of other smaller (maybe that's not the right term) issues – There's a proposal to require manholes for distribution boxes (ease of access and maintenance). There needs to be discussion regarding the 150 gallons per day estimated flow for residences when pumps are used (a sizing/reserve capacity) issue. There needs to be discussion regarding allowing the inlet (if it is water tight) of a tank to be in groundwater. What are your thoughts and concerns about these?*

**Bear River** - Do not require manhole risers for d-boxes but do better mapping/digital photos at the final inspection.

**Central** – *Manholes*: I would support this suggestion. *Flow*: No comment at this time. *Inlet*: Water tight is a relative term and is not something that should be considered permanent. I don't believe a tank and a fitting can remain water tight indefinitely and over time there will be a possibility of contamination.

**Davis** - *Manholes*: Ease of access and maintenance are always good ideas—the requirement is a good thing. *Flow*: We believe that the 150 gallons/day is sufficient at this time. We also think that in relation to pumps and power problems that there needs to be some kind of minimum tank “storage” size or backup power supply requirement. *Inlet*: We question why a tank's inlet would ever be under water (not relevant to our County I guess). We see a problem with allowing this and wonder how you can even test accurately for “water tight.”

**Salt Lake Valley** - In regards to the smaller issues, the Department sees distribution boxes in a small portion of the systems that are installed. The majority of systems and lot constraints push designs to be deep wall trench systems.

The Department has a concern with stating that a residence will have only 150 gallons of flow, when the Drinking Water Rules require 400 gallons per day be available at a minimum.

The discussion of watertight inlets allowing for the inlet to be in groundwater presents many challenges. There is no way to guarantee the watertight seal won't fail over time. What are the limitations of the seal that is making the seal "water tight" and how is this seal affected over time when buried and placed in the environment. In addition, over time what indicates a failure of the seal being "water tight". Allowing the inlet to sit in the groundwater will increase the possibility of leach field failures if the seal is compromised.

**Southeast** - No to manholes for distribution box. Maybe I can see it if they are 150 feet away from the tank, but generally that is not the case.

**Southwest** – SWUPHD agrees that access to distribution boxes for increased maintenance would be valuable. Manholes may be an extreme measure. Could something smaller, such as a sprinkler box, adequately provide this access?

**Summit** – We agree that these items need more discussion.

**Tooele** - We don't have strong opinions on any of these issues, but agree that more discussion needs to take place. Perhaps in a COWP meeting.

**Tri County** - We would not be in favor of requiring man holes on distribution boxes. This would cause people to not install distribution boxes. I do not understand the pumping issue. We install many pump systems and have had very few problems. Figuring out sizing based on the 150 gal per day should be easy to do. I am not sure why I would have groundwater up to the inlet. Lets not spend too much time on this. The few cases where this would happen can be dealt with by the local jurisdiction.

**Utah County** - UCHD would be in support of inspection holes for distribution boxes but not necessarily "manholes." Quite often the distribution box is an excellent place to locate or identify problems. UCHD would want some better information on actual size of the cover and safety precautions for accessing and removal of the cover. UCHD would oppose installation of a septic tank inlet in groundwater. UCHD is open to suggestion as to what would be a more reasonable GPD flow estimate. If the flow is for the purpose of determining the size of a pumping chamber, perhaps setting a ratio to the size of the septic tank should be a good determining factor?

**Wasatch** – Requiring access to a the d-boxes is a good compromise. Sizing at 150 gpd is a generally accepted standard; we are ok with current wording. We are not convinced that having the inlet of the tank in ground water is a good idea.

**Weber Morgan** - Weber-Morgan would support the requirement to add access from the surface to distribution or drop boxes. We would suggest that if this becomes a requirement, then a requirement to use distribution or drop boxes be added to the rule. With current rule language, a requirement to add surface access may deter the use of distribution or drop boxes in favor of less desirable methods that do not require access.

Weber-Morgan maintains that the current daily wastewater flow of 150 gallons per day per bedroom remain is adequate and should not be changed in relation to all allowed onsite systems with the exception of Packed-bed media.

Weber-Morgan agrees that the 150gpd per bedroom requirement may result in some large pump chamber requirements if the designer chooses that strategy to meet the emergency operating capacity. These situations would be rare and limited. The example discussed in the stakeholders meeting, a 2500 gpd wastewater flow, would be a 15 bedroom house. Weber supports the language as written in the current draft. This language provides the designer with 2 design strategies to utilize for emergency operation conditions. Weber would support the consideration of adding additional design strategies to the rule that would accomplish continued operation of the system during emergency conditions. Weber-Morgan does not support changing the residential daily wastewater flow of 150 gpd per bedroom, to address this issue.

*8. What is your specific appeals/adjudicative process for your department – step by step process, if someone feels they need to go through that process for wastewater issues.*

**Bear River** - Step 1: Appeal the issue by meeting(s) with the EH Director and EH Deputy Director.

Step 2: Appeal EH decision by requesting a meeting with the Health Officer.

Step 3: Appeal Health Officer's decision by requesting a hearing with a Board of Health appointed hearing officer.

Step 4: Appeal Hearing Officer's decision at district court.

**Central** - It is handled at the EHS level with final approval given by the Director of EH. If the EHS and contractor/ installer cannot come to terms, a meeting will be held with the Director of EH to figure out a solution.

**Davis** - Our process is to have the EH Director and EHS sit down with the owner/designer to discuss the issues. If there were continued issues or a resolution was not reached, the Health Officer would become involved and a meeting would be held. The final step is to present the issues to the Board of Health. Our Division does have an adjudicative hearing process that follows this same path but the meetings would be formalized with a hearing officer and is usually used for enforcement of non-compliance.

**Salt Lake Valley** - The Department has adopted Adjudicative Hearing Procedures (The complete hearing procedures can be found at [www.slvhealth.org](http://www.slvhealth.org) under Health Regulations). This has varying levels of appeal and includes: Departmental Conference, Departmental Hearing, and Departmental Appeal. A departmental conference is the lowest level and allows for an applicant to meet with staff and management to resolve the points of conflict. The next level is a departmental hearing that has an internal hearing officer, not related to the case that reviews information presented by the Department and by the individual concerning their request. The Departmental Appeal has a contracted Administrative Law Judge that can review the record or hold a hearing about the information being disputed and then makes a decision about the case.

The Hearing Procedures do allow an individual to go to the Board of Health after a decision has been made at the Departmental Hearing or Appeal Level. The Board of Health was approached when Mill D was required to meet State Rule and place approved wastewater treatment systems in, in lieu of outhouses and vault privies.

**Southeast** - We don't have an official appeals process now.

**Southwest** – SWUPHD Environmental Health division does not have a written appeal process at this time for wastewater issues. Currently, appealed issues would go the Health Officer or the SWUPHD Board of Health for resolution.

**Summit** – Appeals go to the environmental director- health director- board of health.

**Tooele** - Again we have never had to go through this process, but if we did we would first have a meeting with the EH Director and LHO; then an appeal/decision by the BOH, then on to legal if needed.

**Tri County** - I don't have our process in front of me, but if someone wants to appeal an inspector's decision, it is taken to the Environmental Health Director. If they don't like the decision it is taken to the Health Officer. If they don't like his decision it is taken to the Board of Health. Their decision is final. I cannot remember anything even going to the Health Officer. Appeals are rare.

**Utah County** - If an individual appeals any action by UCHD they would appeal to our Health Officer. If not satisfied with his ruling they would appeal to the Board of Health. If not satisfied with the Board of Health Ruling they could file an appeal with a court of law.

**Wasatch** – The chain of appeal is; Environmental Health Director, Health Officer, Board of Health, and ultimately legal action.

**Weber Morgan** - Weber-Morgan has established an adjudicative process for addressing parties aggrieved by a health department action. The first step in this process is a departmental conference, and informal meeting of the aggrieved party and department staff. If a resolution is not reached, the aggrieved party has the option to request a departmental hearing. Hearing officers are hired by the health department to take testimony from both parties. The hearing officer will then determine if the department's actions were correct for the situation. The aggrieved party can appeal the hearing officer decision to the board of health for a final determination.

In Weber, the board of health determined that they did not have the technical expertise to address many of the issues related to onsite wastewater. The board created a wastewater advisory committee to review regulatory issues and appeals. The advisory committee is made up of professionals from the county in areas that represent water quality, Central Weber Sewer District, agricultural interests, consulting engineers, development community, contractors, education, geology community, system owners and Utah State University Training Center. It has become practice for the board of health to have the advisory committee review appeals related to onsite wastewater issues and provide action recommendations to the board. The board will then make a final determination for the action taken.